

STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor:

Bright Futures Youth Center, Inc.

Contractor Address:

180 Pleasant Street, Hartford, CT .06103

Contract Number:

14DSS1301WV / 064BFY-HHD-04

Amendment Number:

A2

Amount as Amended:

\$217,418.00

Contract Term as Amended: 10/1/2014 to 6/30/2017

The contract between Bright Futures Youth Center, Inc. (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Office of the Attorney General on 10/21/2015, is hereby further amended as follows:

- 1. The total maximum amount payable under this contract is increased by \$53,086 from \$164,332.00 to \$217,418. The additional funds are to allow the Contractor to continue services for an additional 9 months.
- 2. The budget on page 2 of Amendment 1 shall be deleted and replaced in its entirety with the budget of page 2 of this amendment.
- 3. The term of this contract shall be extended by 9 months and the end date of the contract is changed from 9/30/16 to 6/30/17.
- 4. DSS contract/Contract person on page 1 of the original contract shall be deleted and replaced as follows: Donna LoCurto at (860) 424-5323.

All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

PART I

FINANCIAL SUMMARY

PROGRAM NAME: PROGRAM NUMBER:

Bright Futures 14DSS1301WV A2

	Requested	Adjustments	Approved
Contract Amount			
For Amendments Only			
Previously Approved Contract Amount	\$ 164,322	\$ 53,080	\$ 217,418
Amount of Amendment	Total Same Total	Adjustments	Revised Total

Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	UNIT RATE 1a. Bed Days 1b. Client Advocate 1c. Security Deposit 1d. Other Unit Rate Costs				
	TOTAL UNIT RATE				
2	2a. Accounting 2b. Legal 2c. Independent Audit 2d. Other Contractual Services TOTAL CONTRACTUAL SERVICES	15,600 - - 107,250	122,850	4,560 - - 36,195 40,755	20,160 - - 143,445 163,605
3	ADMINISTRATION 3a. Admin. Salaries 3b. Admin. Fringe Benefits 3c. Admin. Overhead TOTAL ADMINISTRATION		e e	-	
4	DIRECT PROGRAM STAFF 4a. Program Salaries 4b. Program Fringe Benefits TOTAL DIRECT PROGRAM				
5	OTHER COSTS 5a. Program Rent 5b. Consumable Supplies 5c. Travel & Transportation 5d. Utilities 5e. Repairs & Maintenance 5f. Insurance 5g. Food & Related Costs 5h. Other Project Expenses	2,840 2,100 27,600 1,950 3,812 600 2,580	41,482	456 450 10,350 0 1,075 0 - 12,331	3,296 2,550 37,950 1,950 4,887 600 2,580 53,813
6 7		-	-		
8	TOTAL NET PROGRAM COST (Sum of 1 through 6, minus Line 7)		164,332	53,086	217,418

SIGNATURES AND APPROVALS

14DSS1301WV/064BFY-HHD-04 A2

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

CONTRACTOR	
Bright Futures Youth Center, Inc.	
George Cruz, Executive Director	9 /28 / 16 Date
DEPARTMENT OF SOCIAL SERVICES	
Jung Bh	9,29,16
RODYRICK L. BREMBY, Commissioner	Date
OFFICE OF THE ATTORNEY GENERAL	
	10 15 116 Date
ASST / ASSOC. ATTORNEY GENERAL (Approved as to form)	Date



STATE OF CONNECTICUT

NONDISCRIMINATION CERTIFICATION - Affidavit

By Entity

For Contracts Valued at \$50,000 or More

Documentation in the form of an <u>affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended</u>

INSTRUCTIONS:

For use by an <u>entity</u> (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of an oath. I am George Cruz of Bright Futures Unth Carlett, an entity Name of Entity duly formed and existing under the laws of Name of State or Commonwealth I certify that I am authorized to execute and deliver this affidavit on behalf of Name of Entity has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended. Authorized Signatory Coloride Cruz Printed Name

Sworn and subscribed to before me on this 28 day of Subscribed and sworn (or affirmed) before me this

28 day of Subscribed and sworn (or affirmed) before me this

29 day of Subscribed and sworn (or affirmed) before me this

20 to by

Commission Expiration Date

IRIS MARIA CARIDAD VIZCARRONDO, Notary Public

My Commission Expires September 30, 2021



STATE OF CONNECTICUT NONDISCRIMINATION CERTIFICATION — New Resolution By Entity

For Contracts Valued at \$50,000 or More

Documentation in the form of a <u>corporate</u>, <u>company</u>, or partnership policy adopted by resolution of the board of <u>directors</u>, <u>shareholders</u>, <u>managers</u>, <u>members or other governing body</u> of a contractor that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended

INSTRUCTIONS:

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Submit to the awarding State agency prior to contract execution.

Submit to the awarding State agency prior to contract execution
CERTIFICATION OF RESOLUTION:
I, George Cruz , Executive Director, or Bright to bres York Curter, The Name of Entity
an entity duly formed and existing under the laws of Name of State or Commonwealth
certify that the following is a true and correct copy of a resolution adopted on the 38 th day of
September, 20 16 by the governing body of Bright Fiberes Gath Center, Inc.
in accordance with all of its documents of governance and management and the laws of
Name of State or Commonwealth
or revoked, and is in full force and effect.
RESOLVED: That the policies of Bright Futures Worth Center Decomply with the
nondiscrimination agreements and warranties of Connecticut General Statutes
§§ 4a-60(a)(1) and 4a-60a(a)(1), as amended.
The undersigned has executed this certificate this 28th day of September, 2016.
9 28 14 Date
Authorized Signatory Date
Printed Name



STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more, pursuant to C.G.S. §§ 4-250, 4-252(c) and 9-612(f)(2) and Governor Dannel P. Malloy's Executive Order 49.

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (I) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE:	☐ Initial Certification	✓ 12 Month Anniversary Update (Multi-year contracts only.)
	Updated Certification recently filed	n because of change of information contained in the most I certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

1) "Contract" means that contract between the State of Connecticut (and/or one or more of it agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State

If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;

"Contractor" means the person, firm or corporation named as the contactor below;

"Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii); "Gift" has the same meaning given that term in C.G.S. § 4-250(1);

"Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (8) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding Gifts by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a Gift to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after January 1, 2011, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(f)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for <u>statewide public office</u>, in violation of C.G.S. § 9-612(f)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after January 1, 2011 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(f)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for <u>statewide public office</u> or the <u>General Assembly</u>, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

Contribution Date	Name of Contributor	Recipient	Value	Description
Lawfu	l Campaign Contributions to	Candidates for th	e General Assembly:	
Contribution Date	Name of Contributor	Recipient	Value	Description
Bright For	as true to the best of my known as true to the best of my known actor Name		Coporae	
			county of	CONNECTION, s.s. TO ONE STORMAGE SENSOR DESCRIPTION OF SENSOR DES
		My Comr	nission Expires	IZCARRONDO, Notary Public pires September 30, 2021

My Commission Expires September 30, 2021



STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed a

, the undersigned, hereby swear that I ontract, as described in Connecticut Ge contract who is authorized to execute consulting agreement in connection with	meral Statutes 9 40 01(0)	ear that I have	not entered into any
onsultant's Name and Title	Nan	ne of Firm (if app	olicable)
Start Date End Da	ate Cos		
Description of Services Provided:			
f YES: Name of Former State Agency	Ter	mination Date o	f Employment
Name of Former State Agency	edge and belief, subject to the p	penalties of false	9-30-16
Name of Former State Agency Sworn as true to the best of my knowle		penalties of false Key Personnel	9-30-16
Name of Former State Agency Sworn as true to the best of my knowle Printed Name of Bidder or Contractor	Signature of Principal or Color Color Printed Name (of above) n this day of	Key Personnel	Awarding State Agency TE OF CONNECTICUT, s.s.
Name of Former State Agency Sworn as true to the best of my knowle Printed Name of Bidder or Contractor Sworn and subscribed before me o	Signature of Principal or Color Color Printed Name (of above) n this day of	Key Personnel County of	Statement. 9-30-16 Date Awarding State Agency TE OF CONNECTICUT, s.s.

WORKFORCE ANALYSIS

Contractor Bright Futures Youth Center, Inc. Address 180 Pleasant Street, Hartford, CT .06103			Number of Connecticut Employees Full-time: Part-time:						•	
			Employment figures obtained from							
			Visual Check				Employment Records			
					Contractor «Contract		A PARTY OF THE PROPERTY OF THE PARTY OF THE			
JOB CATEGORIES	TOTALS	WH Not of t On		BLACK (Not of Hispanic Origin)	HISF	PANIC	ASIAN OR PACIFIC ISLANDER	AMER I OR ALA NAT	SKAN	PERSON WITH DISABILITIES
		Malie	Female	Male Female	Male	Female	Main Femal	te Male		
Officials & Managers										
rofessionals						1				
Fechnicians										
Service Workers										
Office & Clerical						1				
Craft Workers (Skilled)										
Operators (Semi- Skilled)						10				
Laborers (Unskilled)						2				
TOTALS								VAS DIKE		
Totals One Year Ago						IOD TO	AINIEES	(C)	1,	
				FORMAL (ON-THE	JOB-1R	AINEES			
Apprentices										
Trainees										
Yes Do you	No 🗆 promise t	If yes, o develo N/A [date of op and i	l an apprentice	n ccessful ship pro	Affirma	; If no, exp tive Action Pl	an?	8-1 to 40	6a-68-17 of the
Yes 🗆	No 🗌	N/A	Ex	plain:						
3. Accordi	ng to EE	O-1 dat osition	a, is the of the w	composition o ork force in the	CICICIAN	ork force it labor i	e at or near pa market area?	arity when	compar	ed with the rac
Yes 🗹	No□	Expla	nin:	Signage	_			minosin bu	ginese er	nterprises?
				set aside a porti	on of the	contract	ior legitimate	пиноту оп	omean C	
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Authorized	Signature	e:	-	me (-	-	Date.			